

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SD	753/6	7/7/80
O.I.P.E. CLASSIFIER		8	7-13-80
FORMALITY REVIEW	ST	60245	7-21-80
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)..... Canceled  
 ÷ ..... Restricted

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 Referred  
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 Appeal  
 Objected

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Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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